

## **PSJ1 Exh 39**

**From:** Garofalo, Angela  
**Sent:** Tue, 13 Jun 2017 17:45:07 -0400  
**To:** Engle, Rollin  
**Cc:** Shaheen, Richard;Chunderlik, George;Garofalo, Angela  
**Subject:** Loss  
**Attachments:** 00003532.PDF



Rolling,  
Store has investigated and cannot determine what happened. Can you send me a report showing all purchases and dispensing since May 1. We did the annual control inventory then and everything looked good.  
Thanks,  
Angela

**GIANT EAGLE PHARMACY**  
**Suspected Controlled Substance Loss**  
**DEA Notification**

Date: 6/2/17

Dear Agent in Charge:

The Giant Eagle pharmacy listed below has identified a suspected controlled drug loss. If we confirm the suspected loss as actual, we will initiate a loss prevention investigation and notify the local police department and state regulatory agency. We will submit a DEA-106 once we have gathered adequate information about the actual loss. If you have any questions concerning this suspected loss or the outcome of the preliminary audit, or if you would like to assist in the investigation, please contact the Pharmacy District Leader listed below.

Details and Date of Suspected Loss: #120 Hydralazine/APAP 5/3/15 5/30/17  
#40 amphetamine 15mg tab 5/30/17

Giant Eagle Pharmacy #: 6381 Pharmacy Team Leader: Daniella Gray  
 Name of RX TM completing the form (if different than the RXTL): Jen Edwards

Signature of RX TM completing the form: [Signature]  
 Pharmacy Address: 36475 Euclid Ave

Willoughby OH 44094

Telephone: 440 946 7714 DEA Number: BG6670524

Pharmacy District Leader: Angela Garofalo

Address: Richmond Rd Bedford OH

Office Telephone:  Cell Phone: 216-403-8472

**Pharmacy Instructions:**

Please check one of the boxes below to indicate which office was notified:

☐ Ohio pharmacies must also notify the Board of Pharmacy by telephone as required by Ohio Board of Pharmacy rule 4729-9-15.

Name of Ohio Board of Pharmacy representative contacted: Susan King and Lora D (Supervisor)

Date called: 6/2/17 Time called: 3:12pm a.m. (p.m.) (circle one)

Spoke to the agent: Yes / No Left a voicemail: Yes No Spoke to SUSAN; VM for LISA D.

Name of team member who contacted the Board: Jen Edwards

**DEA Offices Covering Giant Eagle Pharmacies:**

DEA Office	Area/State Covered	Phone Number	Fax Number
<input type="checkbox"/> Pittsburgh Resident Office	Western PA (Zip Codes 150 to 168)	(412) 777-1870	(412) 777-1880
<input type="checkbox"/> Baltimore District Office	Maryland	(410) 244-3629	(410) 244-3590
<input type="checkbox"/> Charleston Resident Office	West Virginia	(304) 347-5209	(304) 347-5212
<input checked="" type="checkbox"/> Cleveland Resident Office	Northern Ohio	(216) 274-3600	(216) 664-1307
<input type="checkbox"/> Columbus Resident Office	Central and Southern Ohio	(614) 255-4200	(614) 469-5788
<input type="checkbox"/> Detroit Division	Toledo	(313) 834-4000	(313) 225-2163

The pharmacy must fax this form to the following at Giant Eagle, Inc.:

Sr. Manager of Quality and Compliance at 412-968-1552

Sr. Director Risk Management Services and Corporate Counsel at 412-967-3761

Created: 07-28-11

Revised: 2/10/14